



WELL COMPLETION FORM
WELL HISTORY - DESCRIPTION OF WELL & LEASE

OPERATOR: License # _____

Name: _____

Address 1: _____

Address 2: _____

City: _____ State: _____ Zip: _____ + _____

Contact Person: _____

Phone: (_____) _____

CONTRACTOR: License # _____

Name: _____

Wellsite Geologist: _____

Purchaser: _____

Designate Type of Completion:

- New Well Re-Entry Workover
- Oil WSW SWD SIOW
- Gas D&A ENHR SIGW
- OG GSW Temp. Abd.
- CM (Coal Bed Methane)
- Cathodic Other (Core, Expl., etc.): _____

If Workover/Re-entry: Old Well Info as follows:

Operator: _____

Well Name: _____

Original Comp. Date: _____ Original Total Depth: _____

- Deepening Re-perf. Conv. to ENHR Conv. to SWD
- Conv. to GSW
- Plug Back: _____ Plug Back Total Depth _____
- Commingled Permit #: _____
- Dual Completion Permit #: _____
- SWD Permit #: _____
- ENHR Permit #: _____
- GSW Permit #: _____

Spud Date or Recompletion Date Date Reached TD Completion Date or Recompletion Date

API No. 15 - _____

Spot Description: _____

_____-_____-_____- Sec. _____ Twp. _____ S. R. _____ East West

_____ Feet from North / South Line of Section

_____ Feet from East / West Line of Section

Footages Calculated from Nearest Outside Section Corner:

- NE NW SE SW

County: _____

Lease Name: _____ Well #: _____

Field Name: _____

Producing Formation: _____

Elevation: Ground: _____ Kelly Bushing: _____

Total Depth: _____ Plug Back Total Depth: _____

Amount of Surface Pipe Set and Cemented at: _____ Feet

Multiple Stage Cementing Collar Used? Yes No

If yes, show depth set: _____ Feet

If Alternate II completion, cement circulated from: _____

feet depth to: _____ w/ _____ sx cmt.

Drilling Fluid Management Plan

(Data must be collected from the Reserve Pit)

Chloride content: _____ ppm Fluid volume: _____ bbls

Dewatering method used: _____

Location of fluid disposal if hauled offsite: _____

Operator Name: _____

Lease Name: _____ License #: _____

Quarter _____ Sec. _____ Twp. _____ S. R. _____ East West

County: _____ Permit #: _____

AFFIDAVIT

I am the affiant and I hereby certify that all requirements of the statutes, rules and regulations promulgated to regulate the oil and gas industry have been fully complied with and the statements herein are complete and correct to the best of my knowledge.

Submitted Electronically

KCC Office Use ONLY

- Letter of Confidentiality Received
Date: _____
- Confidential Release Date: _____
- Wireline Log Received
- Geologist Report Received
- UIC Distribution
- ALT I II III Approved by: _____ Date: _____



1099629

Operator Name: _____ Lease Name: _____ Well #: _____

Sec. _____ Twp. _____ S. R. _____ East West County: _____

INSTRUCTIONS: Show important tops and base of formations penetrated. Detail all cores. Report all final copies of drill stems tests giving interval tested, time tool open and closed, flowing and shut-in pressures, whether shut-in pressure reached static level, hydrostatic pressures, bottom hole temperature, fluid recovery, and flow rates if gas to surface test, along with final chart(s). Attach extra sheet if more space is needed. Attach complete copy of all Electric Wire-line Logs surveyed. Attach final geological well site report.

Drill Stem Tests Taken <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(Attach Additional Sheets)</i> Samples Sent to Geological Survey <input type="checkbox"/> Yes <input type="checkbox"/> No Cores Taken <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Run <input type="checkbox"/> Yes <input type="checkbox"/> No Electric Log Submitted Electronically <input type="checkbox"/> Yes <input type="checkbox"/> No <i>(If no, Submit Copy)</i> List All E. Logs Run: _____	<input type="checkbox"/> Log Formation (Top), Depth and Datum <input type="checkbox"/> Sample Name Top Datum
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CASING RECORD <input type="checkbox"/> New <input type="checkbox"/> Used							
Report all strings set-conductor, surface, intermediate, production, etc.							
Purpose of String	Size Hole Drilled	Size Casing Set (In O.D.)	Weight Lbs. / Ft.	Setting Depth	Type of Cement	# Sacks Used	Type and Percent Additives

ADDITIONAL CEMENTING / SQUEEZE RECORD				
Purpose:	Depth Top Bottom	Type of Cement	# Sacks Used	Type and Percent Additives
_____ Perforate _____ Protect Casing _____ Plug Back TD _____ Plug Off Zone				

Shots Per Foot	PERFORATION RECORD - Bridge Plugs Set/Type Specify Footage of Each Interval Perforated	Acid, Fracture, Shot, Cement Squeeze Record <i>(Amount and Kind of Material Used)</i>	Depth

TUBING RECORD: Size: _____ Set At: _____ Packer At: _____ Liner Run: Yes No

Date of First, Resumed Production, SWD or ENHR. _____ Producing Method:
 Flowing Pumping Gas Lift Other *(Explain)* _____

Estimated Production Per 24 Hours	Oil Bbls.	Gas Mcf	Water Bbls.	Gas-Oil Ratio	Gravity
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DISPOSITION OF GAS: <input type="checkbox"/> Vented <input type="checkbox"/> Sold <input type="checkbox"/> Used on Lease <i>(If vented, Submit ACO-18.)</i>	METHOD OF COMPLETION: <input type="checkbox"/> Open Hole <input type="checkbox"/> Perf. <input type="checkbox"/> Dually Comp. <input type="checkbox"/> Commingled <i>(Submit ACO-5)</i> <input type="checkbox"/> Other <i>(Specify)</i> _____ <i>(Submit ACO-4)</i>	PRODUCTION INTERVAL: _____ _____
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Form	ACO1 - Well Completion
Operator	West Bay Exploration Co.
Well Name	Yost 1-3
Doc ID	1099629

All Electric Logs Run

Sonic
Comp
ND
Micro
Dual Induction

Form	ACO1 - Well Completion
Operator	West Bay Exploration Co.
Well Name	Yost 1-3
Doc ID	1099629

Tops

Name	Top	Datum
B/Anhydrite	1829	+972
Stotler	3568	-767
Heebner Shale	4204	-1403
Lansing	4266	-1465
Stark Shale	4602	-1801
Marmaton	4781	-1980
Pawnee	4868	-2067
Fort Scott	4890	-2089
Cherokee Shale	4908	-2107
Lower Cherokee Sh	4944	-2143
St Genavieve	5119	-2318
St Louis	5212	-2411

ALLIED CEMENTING CO., INC.

Federal Tax I.D.# 48-0727880

REMIT TO P.O. BOX 31
RUSSBLL, KANSAS 67665

SERVICE POINT: 27196
LIBERAL KS

DATE <u>11-3-12</u>	SRL <u>3</u>	TRP <u>28s</u>	RANGR <u>29 W</u>	CALLED OUT	ON LOCATION	JOB START <u>5:30am</u>	JOB FINISH <u>6:30am</u>
LEASE <u>WEST</u>	WELL # <u>1-3</u>	LOCATION <u>INGALLS K2</u>				COUNTY <u>COAGU</u>	STATE <u>KS</u>
OLD OR NEW (Circle one)		<u>ST WITH LK</u>				<u>1.03</u>	<u>7.45</u>

CONTRACTOR VAL #1 OWNER SAME

TYPE OF JOB PTA

HOLE SIZE 16" TD

CASING SIZE 8 1/2" DEPTH

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 200 PSI MINIMUM

MEAS. LINE SHOES JOINT N/A

CEMENT LEFT IN CSG.

PERFS. N/A

DISPLACEMENT 2.2 BBL

CEMENT AMOUNT ORDERED 170 SK

60/40 4 1/2% GEL

COMMON <u>102-A</u>	@	<u>1770</u>	<u>1825.00</u>
POZMIX <u>68</u>	@	<u>950</u>	<u>635.00</u>
GEL <u>6.5K</u>	@	<u>2340</u>	<u>170.00</u>
CHLORIDE	@		
ASC	@		

EQUIPMENT

PUMP TRUCK CEMENTER Collegan 1

549/550 HELPER A. Tapin 3

BULK TRUCK DRIVER V. Torres 3

472/467

BULK TRUCK DRIVER

HANDLING 176

MILEAGE 7.61

TOTAL 4027.14

380.5

436.48

486.25

989.30

4027.28

REMARKS:

THANK YOU!

SERVICE

DEPTH OF JOB 1800'

PUMP TRUCK CHARGE 22,878.44

EXTRA FOOTAGE

MILBAGE SDM @ 7.10 22,878.44 385-

MANIFOLD @ 440 2,200.00

TOTAL 28,548.84

CHARGE TO: WEST BAY Exp.

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

N/A

To Allied Cementing Co., Inc.
You are hereby requested to rent cementing equipment and furnish cementer and helper to assist owner or contractor to do work as is listed. The above work was done to satisfaction and supervision of owner agent or contractor. I have read & understand the "TERMS AND CONDITIONS" listed on the reverse side.

TOTAL

TAX 512.75

TOTAL CHARGE 1682.62

DISCOUNT 2064.79 IF PAID IN 30 DAYS

net 4817.83

SIGNATURE [Signature]

PRINTED NAME

Handwritten notes and scribbles

Yost #1-3

Formation Tops

FORMATION TOPS AND STRUCTURAL COMPARISON

FORMATION	SAMPLE TOPS		LOG TOPS		COMPARISON WELL Ritchie Exploration Yost #3A SW NE 3-28-29W
	Depth	Datum	Depth	Datum	
B/Anhydrite	not called		1829'	+972	+970 +2'
Stotler	not called		3568'	-767	-778 +11'
Heebner Shale	4212'	-1411	4204'	-1403	-1413 +10'
Lansing	4270'	-1469	4266'	-1465	-1472 +7'
Stark Shale	4606'	-1805	4602'	-1801	-1804 +3'
Marmaton	4782'	-1981	4781'	-1980	-1982 flat
Pawnee	4875'	-2074	4868'	-2067	-2072 +5'
Fort Scott	4900'	-2099	4890'	-2089	-2096 +7'
Cherokee Shale	4918'	-2117	4908'	-2107	-2115 +8'
Lower Cherokee Sh.	4952'	-2151	4944'	-2143	-2152 +9'
St. Genevieve	5128'	-2327	5119'	-2318	-2283 -35'
St. Louis	5421'	-2620	5212'	-2411	-2360 -51'
RTD	5425'	-2624)			
LTD			5414'	-2613	

Yost #1-3

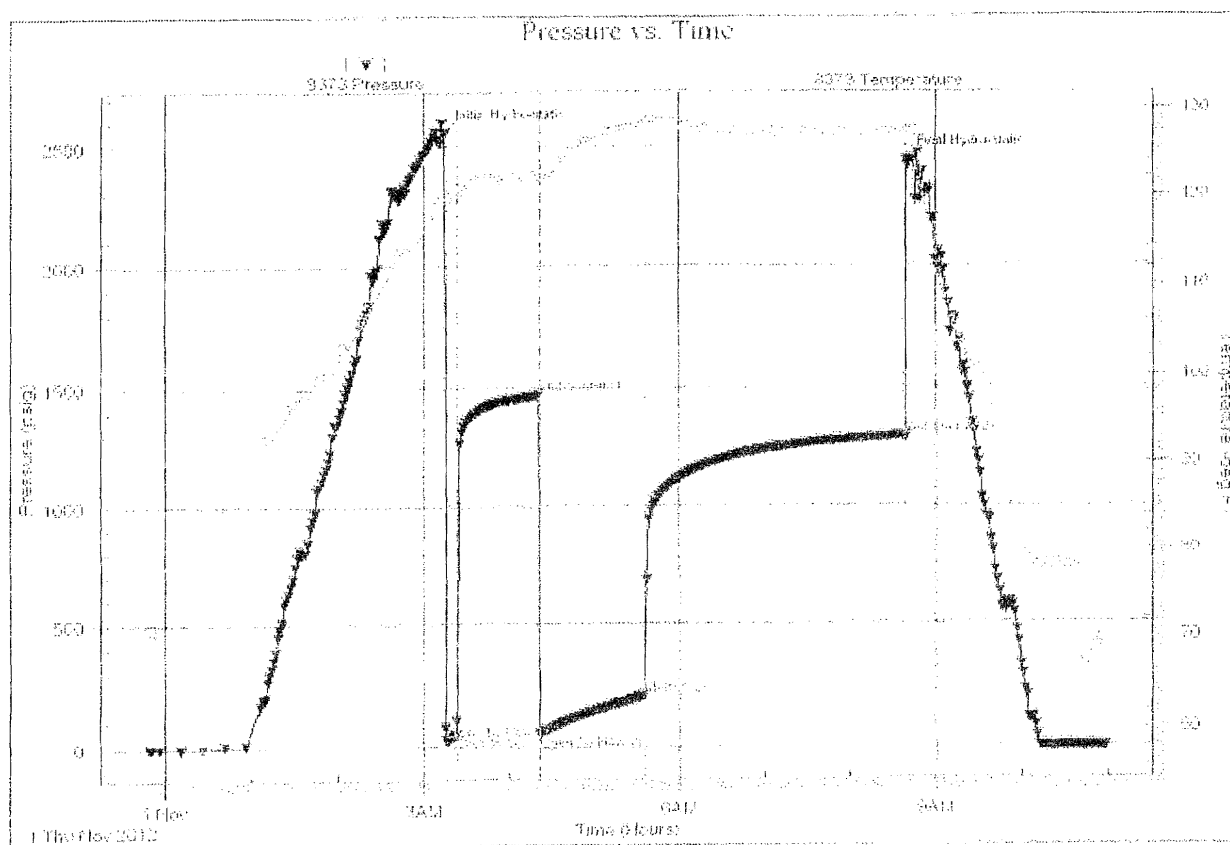
Drill Stem Tests

DRILL STEM TESTS

DST No. 1 St. Louis
Interval: 5204'-5240'
Times: 5-60-75-180
Recovery: 156' MCW (20m, 80w); 189' MCW
(2m, 98w) chl. 65,000
FP: 30-51/53-207 SIP: 1477-1294
HP: 2554-2433 BHT: 127 deg. F

IFP: weak surface blow bldg. to 3 inches
ISIP: no return blow
FFP: slowly bldg. to B.O.B. in 50 minutes
FSIP: no return blow

2010: 5: 0073 Inside Wellbore Exploration Yost #1-3 DST Test Number 1



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Federal Tax I.D.# 48-0727860

REMIT TO P.O. BOX 31
RUSSELL, KANSAS 67665

SERVICE POINT
LIBERTY KS 27196

DATE 11-3-12	SEC 3	FIVE 28's	RANGE 29 W	CALL BY OUT	ON LOCATION	JOB START 5:30 AM	JOB FINISH 6:30 AM
LEASE VOST	WELL # 1-3	LOCATION INGLETS KS	COUNTY GIBBY	STATE KS			
OLD OR NEW (Circle one) <u>NEW</u>							

CONTRACTOR Val #1 OWNER SAME

TYPE OF JOB ETA

HOLE SIZE 14" ID. DEPTH 1705K

CASING SIZE 8 1/2" ID. DEPTH 100/110 1/2" GAL

TUBING SIZE DEPTH

DRILL PIPE DEPTH

TOOL DEPTH

PRES. MAX 200 PSI MINIMUM

MEAS. LINE SHO JOINT N/A

CEMENT LEFT IN CSO.

PERFS. APP

DISPLACEMENT LL BBL

CEMENT AMOUNT ORDERED 1705K

COMMON 102 A @ 1770 - 1825 20

POZMIX 68 @ 95 - 100 80

OBL 65K @ 232 - 180 40

CHLORIDE @

ASC @

EQUIPMENT

PUMP TRUCK CEMENTER Polycan 1

#549/530 HELPER A. Tapin 3

BULK TRUCK

#872/467 DRIVER V. TORRES 3

BULK TRUCK

DRIVER

HANDLING 176 @ 2.22 436.88

MILEAGE 7.61 @ 380.5 2884.30

TOTAL 4027.18

SERVICE 4027.18

REMARKS:

THANK YOU!

DEPTH OF JOB 1800'

PUMP TRUCK CHARGE 2249.84

EXTRA FOOTAGE @

MILEAGE 50 mi @ 7.10 355.00 385-

MANFOLD 440 @ 2.25 990.00

TOTAL 2854.84

CHARGE TO: WEST Bay Exp.

STREET

CITY STATE ZIP

PLUG & FLOAT EQUIPMENT

N/A @

TOTAL

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DISCOUNT 3064.29 IF PAID IN 30 DAYS

net 4817.83

PRINTED NAME

CASH